FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

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Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

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COMMITTEE NAME (Must be same as on Statement of	Organization)			
Citizens to Elect Rita Schmidt, Treasurer	• ••••		FORM	
IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue			DR-2 Rev. 12/2009) or Office Use On	
CANDIDATE COMMITTEES ONLY: Candidate Name Political Party (if applicable) Rita Schmidt Republican Office Sought County Treasurer District (if Senate or House)		Lo	Comm. # Logged In Scanned Computer Audited	
ate reports are subject to possible civil and criminal penalties and idea of any other type and the chairperson, for any other type	e of committee, is the individual responsible	(7) and 68/ for filing ti	mely and accura	ite reports.
SIGNATURE OF PERSON FILING REPORT	TELEPHONE		DATE S	IGNED
AM FILING A July 15 thru October 14, 2010	REPORT FOR (1) ELECTION	/(2)NON-	ELECTION YE	AR.
(report date)	Indicate by #	`		
CHECK IF AMENDMENT TO REPORT DATED		Local Com	mittees, enter Da	te of Election
☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a DR-3 is filed.)			er 2, 2010 ocal Committees tion is held awk	, enter County in
STATEMENT OF CASH ON HA	AND			
ASH ON HAND at the beginning of the reporting period. committee. This amount MUST be the same as of the last reporting period or must be zero if this	the cash on hand at the end	\$	0.00	
ADD TOTAL MONEY TAKEN IN THIS PERIOD				
Schedule A: Cash Contributions total (Attach Sc	chedule A) (*also see in-kind below)		3,275.00	
Schedule F: Loans Received total (Attach Schedule F: Loans Received total (Att	dule F)		····	
Schedule H: Total Sales of Campaign Property	(Attach Schedule H)	•••••		
(Schedule H applies to Candidates' C	ommittees Only) SUB-TOTAL	•	3,275.00	
SUBTRACT TOTAL MONEY SPENT THIS PER		••••••••••		
Schedule B: Expenditures total (Attach Schedul			1,446.19	
Schedule F: Loan Repayments total (Attach Sch				
CASH ON HAND at the end of this reporting period (if final report balance must be zero)			1,828.81	
UNPAID BILLS (From Schedule D - Attach Schedule D)		\$		
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)			70.40	
OUTSTANDING LOANS (From Schedule F - Attach Sch	•			
ONSULTANT BREAKDOWN (Schedule G Attached?)			YES ✓	NO
ANDIDATE COMMITTEES ONLY:				
ALUE OF CAMPAIGN PROPERTY (From Schedule H -	Attach Schedule H)	\$		
TATE COMMITTEES: Submit a reconciled campaign ac	count bank statement in January of each	n vear.		

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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COMMITTEE NAME (Must be same as on Statement of Organization)	
Citizens to Elect Rita Schmidt, Treasurer	

CHECK THIS BOX IF
AMENDING FORM

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STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
07/23/10	ID# CK#	Terry Diekman 111 Bonnie Blvd Hudson, IA 50643		\$100.00	INCOME
08/01/10	ID# CK#	Larry Schmidt 1826 Scarbrough Dr Columbia, MO 65201	Brother-in-law	120.00	
07/31/10	ID# CK#	Craig Schmitz 8807 Rickard Rd LaPorte City, IA 50651	Cousin	50.00	
08/03/10	ID# CK#	Joseph Wilson 407 Blue Bell Ct Hudson, IA, 50643		50.00	
08/03/10	ID# CK#	Robert Yuska 4431 Griffith Rd Hudson, IA 50643		50.00	
08/04/10	ID# CK#	Dick Klingaman 4550 W. 4th St Waterloo, IA 50701		100.00	
08/04/10	ID# CK#	Agnes Youngblut 13541 Hammond Ave LaPorte City, IA 50651		50.00	
08/04/10	ID# CK#	Ben Schmitz 302 Parkview Dr Gilbertville, IA 50634	Uncle	50.00	
08/05/10	ID# CK#	Dennis Holbach 422 1st St Hudson, IA 50643		100.00	
08/09/10	ID# CK#	Lance Vanderloo 3608 Inverness Rd Waterloo, IA 50702		50.00	
			SUB-TOTAL	\$ 720.00	
		TOTAL (if last pa	ge of this schedule)	•	

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of \$ 4

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens to Elect Rita Schmidt, Treasurer

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
CHECK THIS BOX IF AMENDING FORM	

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
08/11/10	ID# CK#	Kristen Hargens 419 1st St Hudson, IA 50643		\$100.00	INCOME
08/13/10	ID# CK#	Allen Ricks PO Box 268 Hudson, IA 50643		40.00	
08/14/10	ID# CK#	Jason D. Schmidt 104 Middle Rd Muscatine, IA 52761	Son	100.00	
08/18/10	ID# CK#	Charles Augustine 1970 Falcon Ridge Waterloo, IA 50701		50.00	
08/18/10	ID# CK#	Ivan Miller 3520 DeWitt Wayerloo, IA 50701		50.00	
08/18/10	ID# CK#	Cheryl Einsweiler 405 Beverly Hudson, IA 50643		50.00	
08/18/10	ID# CK#	Diane Hartman 2123 Crescent Dr Apt D Cedar Falls, IA 50613		100.00	
08/19/10	ID# CK#	Jamie Robertson 115 Celeste Hudson, IA 50643		50.00	
08/27/10	ID# CK#	Bruce Strom 1980 Winston Place Waterloo, IA 50701		50.00	
08/27/10	ID# CK#	Rebecca Bertch 4935 Young Rd Waterloo, IA 50701		100.00	
			SUB-TOTAL	s 690.00	

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Page 2 of 4 (for Schedule A)

TOTAL (if last page of this schedule)

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)	_
Citizens to Elect Rita Schmidt, Treasurer	

	SCHEDULE	
l :	A (Rev. 07/03)	MONETARY RECEIPTS
		CK THIS BOX IF NDING FORM

Resentation

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
09/01/10	ID# CK#	Karen Sewick 304 Thelma St Hudson, IA 50643		\$60.00	INCOME
09/02/10	ID# CK#	Bill Colwell 427 Primrose Hudson, IA 50643		100.00	
09/07/10	ID# CK#	Roger Schmitz 1916 6th St Gilbertville, IA 50634	Brother	75.00	
08/24/10	ID#	Shelly Weber 7543 McStay Rd LaPorte City, IA 50651		30.00	
09/08/10	ID# CK#	Carol Cooper 912 W 16th St Cedar Falls, IA 50613		100.00	
09/13/10	ID# CK#	Horace Corey 1206 N Barclay Waterloo, IA 50703		50.00	
09/13/10	ID# CK#	Sven Pedersen 210 Sunset Rd Hudson, IA 50643		50.00	
09/20/10	ID# CK#	Mary Ann DeMuth 3359 Mt Vernon Dr Waterloo, IA 50701		50.00	
09/20/10	ID# CK#	Yvonne Buehner 13732 Terrace Ave Clarksville, IA 50619		40.00	
09/22/10	ID# CK#	Duane Hoffman 1126 Prairie Meadow Ct Waterloo, IA 50701		50.00	
			SUB-TOTAL	\$ 605.00	

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Page 3 of 4 (for Schedule A)

TOTAL (if last page of this schedule)

CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens to Elect Rita Schmidt, Treasurer

SCHEDULE	
A (Rev. 07/03)	MONETARY RECEIPTS
CHECK THIS BOX IF AMENDING FORM	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOI FUND- RAISEF
09/22/10	ID# CK#	Marilyn Voorhees 3402 Pheasant Dr Cedar Falls, IA 50613		\$50.00	INCOME
09/25/10	ID# CK#	Elaine Cooney 102 Smith St Hudson, IA 50643		50.00	
09/27/10	CK#	David McCullough 3023 Violet Dr Waterloo, IA 50701		50.00	
09/30/10	ID# CK#	Dave Hoffman 444 Kingsley Ave Waterloo, JA 50701		50.00	
10/02/10	ID# CK#	Marvin Diemer 5026 Bluebell Rd Cedar Falls, IA 50613		50.00	
	ID# CK#	Unitemized Contributions		1010.00	
	ID# CK#				
	ID# CK#			***************************************	
	ID# CK#				
	ID# CK#				
<u> </u>			SUB-TOTAL	\$ 1260.00	

TOTAL (if last page of this schedule)

Page 4 of 4 (for Schedule A)

3275.00

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FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES	
CHECK THIS BOX IF AMENDING FORM		

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens to Elect Rita Schmidt, Treasurer

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION	AMOUNT EXPENDED
07/27/10	ID# CK#	Karen's Printrite 2515 Falls Ave Waterloo, IA 50701	Copies of flyer	\$ 37.45
08/26/10	ID# CK#	Sandee's 1111 South St Waterloo, IA 50702	Campaign buttons	28.89
9/20/10	ID# CK#	Coverall Adv & Promo Inc 1610 Jefferson St Waterloo, IA 50702	Yard signs	1000.00
9/03/10	ID# CK#	Pioneer Graphics 316 W 5th St Waterloo, IA 50701	Campaign cards	219.35
9/16/10	ID# CK#	Hudson Printing Co 411 Jefferson St Hudson, IA 50643	Note pads	160.50
	ID# CK#			
	ID# CK#			
	ID#			
	CK#			

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page 1	of ¹

\$ 1446.19

TOTAL (if last page of this schedule)

(for Schedule B)

FOR INSTRU	ICTIONS, SEE BACK OF FORM	SCHEDULE			
COMMITTE	EE NAME (Must be same as on Statement of O	E IN-KIND CONTRIBUTIONS			
Citizens	to Elect Rita Schmidt, Treasurer	CHECK THIS BOX IF AMENDING FORM			
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
09/17/10	Janan Weber 110 W Central, Box 125 Raymond, IA 50667		Postage stamps	\$ 26.40	
10/14/10	Mary Kurt 1673 245th St Independence, IA 50644	Sister	Postage stamps	44.00	
		S			
		\$ 70.40			
by marriage). (requires candidates to disclose the relationship ationship must be shown to the third degree of See Page 2 of forms packet.) If surname of co hip, enter "not applicable" in the relationship co	consanguinity (blood relative	use) and affinite /relations	Page 1	of 1 or Schedule E)